

The Alaska Code Blue Project

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Code Blue

- Purpose:
 - To identify, prioritize and secure funding for essential rural Emergency Medical Services equipment for prehospital providers.



Problems

- Few capital funds available
- EMS equipment in many parts of rural Alaska was:
 - Obsolete – not conforming to standards of care
 - Inoperable
 - Inadequate to meet patient care needs
 - Unsafe
- Relocation of equipment worsened problems
- Problems impacted medical care, recruitment, retention and operation.

The Need

Transporting a cardiac patient from his residence onto a narrow road, the ambulance quits running and comes to a stop on a one lane bridge with no guard rails over a river. The backup ambulance comes to pick up the patient but is barely running due to sudden mechanical problems. The patient is transferred on the bridge, which is icy and slippery. One Emergency Medical Technician is injured during the patient transfer. The ambulance limps into the hospital 40 minutes away. Repair bills were \$7,000. Several EMTs threaten to never respond again and almost quit the service.

Factoids – State of Alaska

- Largest state in U.S. (574 square miles (2.3 x Texas))
- 574,000 pop.
- 17 of 20 highest peaks in US
- 6,400 miles of coastline
- 246 Federally recognized tribal governments
- State organized into “Boroughs,” not counties



Distances

- Juneau to Seattle – 900 miles
- Anchorage to Adak – 1300 miles
- Anchorage to Dutch Harbor – 800 miles
- Washington to Milwaukee – 810 miles



Factoids – Alaska EMS

- But, it's a small state in some respects
- Four levels of EMS Provider
 - EMT-I (Basic) (1700)
 - EMT-II (Intermediate) (500)
 - EMT-III Intermediate) (500)
 - Mobile Intensive Care Paramedic (250)
- 100 certified ground medical services
- 20 certified air medical services

Regional EMS Offices

- Receive grant funds to address EMS goals
- Not state agencies
 - 3 Non-profits
 - 3 Native Health Corporation based
 - 1 Municipality (North Slope Borough)



Code Blue Steering Committee

- Regional EMS Offices + State EMS Office
- Teamwork understood to be key to success
 - Unified front
 - Consistent decision making
 - Shared responsibilities
- “Group think” not encouraged (or possible!)

Code Blue History

- System in Crisis Paper
- Identification of Essential Needs in Rural Communities
- Identification of Potential Funding Agencies
- Application for Funding
 - Equipment
 - Training

Identification of Need

- Equipment lists in EMS Goals Document
- Local equipment inventories
- “Unique” local needs
- Physician Signed Standing Orders
- EMS Technical Assistance Team Visits
 - Rural Hospital Flexibility Program
 - EMS for Children

Code Blue Categories

- Patient Care Equipment
- Radio/Communications Equipment
- Communications Infrastructure
- Ambulances
- Emergency Vehicles
- Training Equipment
- Extrication
- Search and Rescue/Special Rescue
- Personal Protective Equipment



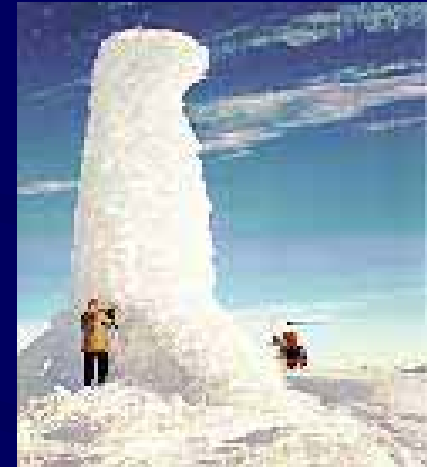
Code Blue Resources

- Database
 - Items
 - Community Match Levels
 - Funding Scenarios
- System for prioritization
- Model specifications
- Telecommunications Consultant (Contract)



Telecommunications Contract

- Author newsletter article
 - New requirements and technologies
 - Land Mobile Radio (Digital Trunking) Project
- Review Code Blue requests
- Provide recommendations regarding equipment and implementation



Evaluation

- Documentation of Need
- Rationale
- Preparation
- Sustainability
- Integration
- Cost
- Community Support
- Compliance with EMS Goals

Process

Community Identifies Need

Item Reviewed by Regional EMS Office

Items Reviewed by Code Blue Steering Committee

Items Prioritized

Items Grouped by Potential Funding Source

Funding Sought



The Code Blue Database

- Maintained by State of Alaska
- Microsoft Access Format
 - Items
 - Categories
 - Communities
- Crystal Reports
 - Lists
 - Crosstabs
 - Models

Code Blue Database Capabilities

- Models (e.g., all items from communities with a USDA match of $> 50\%$ where local match $\geq 5\%$)
- Data Extraction – Targeting particular items for funding, e.g. automated external defibrillators
- Cross-tabs to summarize data

Code Blue Funding

- Local Match
- U.S. Department of Agriculture—Rural Development
- Rasmuson Foundation
- Denali Commission
- State of Alaska
- Rural Hospital Flexibility Program



NEW FINANCIAL RESOURCES
WILL SOON BECOME
AVAILABLE TO YOU
10 19 24 28 46 48

USDA – A Key Resource

- Community Based Assessment
- Eligibility for Match Based on:
 - Population
 - Median Income
 - Road Access
 - Percent of Adults Not Employed
- 1990 Census data will be replaced this year



USDA

Ambulance	\$150,000		
Percentage (USDA)	USDA	Local	State
0%	\$0	\$120,000	\$30,000
15%	\$22,500	\$97,500	\$30,000
35%	\$52,500	\$67,500	\$30,000
55%	\$82,500	\$37,500	\$30,000
75%	\$112,500	\$7,500	\$30,000



Code Blue Phases

- **Phase I** — First assessment of needs and application for funding.
- **Phase II** — Reprioritization and continuation of funding requests.
- **Phase III** — Second assessment of needs and application for funding



Funding, by Source (Phase I)

<u>Source</u>	<u>Amount</u>
U.S. Department of Agriculture	\$2,738,399
Denali Commission	\$960,672
Local Match	\$578,823
Rasmuson Foundation	\$1,125,020
State of Alaska	\$521,028
Rural Hospital Flexibility Program	\$8,380
EMS Training Grant	\$75,000
Direct Legislative Appropriations	\$321,104
	\$6,328,426

Matching Resources to Needs



Benefits

- Increased rescuer safety
 - Contemporary equipment
 - Better Communications
- Better medical care
- Increased visibility of EMS
- Increased communication with local communities
- More local enthusiasm about EMS
- Sharing of knowledge between regions



Code Blue – The Dark Side



Pitfalls

- Very labor intensive project
- “Item creep”
- Competition for funds due to visibility of project (e.g., “Code Red” project)
- “Politicization” of process possible
- Dependent on collegial nature of key players
- Dependent on technical experts for some purchases, e.g. communications
- “Things” are often easier to get than less tangible essentials, like training
- Scalability uncertain

The Importance of “Flex”

- The Rural Hospital Flexibility Program helped fund:
 - Equipment
 - Technical Assistance Team Visits
 - Steering Committee Travel
 - Revision of the EMS Goals Document
- The Code Blue Project benefits greatly from the Flex Program

Code Blue – The Future

- Governor and Legislature continue to be supportive
- Funding agencies continue to be very generous
- System is being built for the long haul
- Collegial/apolitical nature of item assessment is key to success



“New equipment builds confidence and that confidence is seen in patient care. New equipment builds appreciation, and that appreciation is seen in volunteer pride, better maintenance and new members. Professional attitude, that attitude is felt by the patients and the communities they serve.” Chris Budke - Hoonah



Thanks

